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FAX COVER SHEET**DATE:** December 10, 2004**PAGES (INCLUDING COVER):** 39**TO:** Commissioner for Patents **FAX:** 703-872-9306**CLIENT NUMBER:** 060695-0002**FROM:** Gabriel S. Gross/Rep. No. 52,973

MESSAGE: Please see attached Transmittal Forms and Revocations of Power of Attorney with New Power of Attorney and Change of Correspondence Address for the following matters:

Application Nos.:

1.	10/657,722	11.	29/188,787
2.	10/610,312	12.	29/188,052
3.	10,601,133	13.	29/187,658
4.	10/293,235	14.	29/185,105
5.	29/191,069	15.	29/169,951
6.	29/191,067	16.	29/151,726
7.	29/191,066	17.	10/910,953
8.	29/191,065	18.	10/720,578
9.	29/189,363	19.	10/695,429
10.	29/188,902		

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PTO/SB/21 (09-04)

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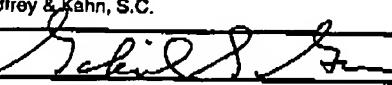
Total Number of Pages In This Submission

Application Number	10/657,722		
Filing Date	09/08/2003		
First Named Inventor	Chris Chudak		
Art Unit	2850		
Examiner Name	Amy R. Cohen		
Total Number of Pages In This Submission	2	Attorney Docket Number	2185.010USU

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

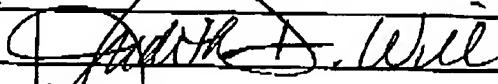
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Godfrey & Kahn, S.C.		
Signature			
Printed name	Gabriel S. Gross		
Date	Dec. 10, 2004	Reg. No.	52,973

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Typed or printed name

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Date

12-10-04

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**REVOCATION OF POWER OF
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NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10657.722
Filing Date	09/08/2003
First Named Inventor	Chris Chudek
Art Unit	2859
Examiner Name	Amy R. Cohen
Attorney Docket Number	2185.010USU

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

20572

Please change the correspondence address for the above-identified application to:

The address associated with
Customer Number:

20572

OR

Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Fax

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Michael Peterach

Date

12/5/04

Telephone

203-332-4142

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

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